

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

Hill PAC

ADDRESS (number and street)

1717 K Street, NW #309B

☐Check if different  
than previously  
reported. (ACC)

Washington

DC

20036

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00363994

3. IS THIS  
REPORT☒NEW  
(N)**OR**☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☒

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE-Election**  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post -Election**  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

07

01

2006

through

07

31

2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Janice Enright

Signature of Treasurer

Electronically Filed by Janice Enright

Date

08

20

2006

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 02/2003)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
Hill PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	7	0	1	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
0	7	3	1	2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2006</span>		71555.80
(b) Cash on Hand at Beginning of Reporting Period .....	57072.59	
(c) Total Receipts (from Line 19) .....	90259.88	1002421.10
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	147332.47	1073976.90
7. Total Disbursements (from Line 31) .....	93078.32	1019722.75
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	54254.15	54254.15
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	40613.02	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

Hill PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	7	0	1	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
0	7	3	1	2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	85750.00	870520.00
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	325.00	3190.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	86075.00	873710.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	2500.00	110297.26
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) .....	88575.00	984007.26
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	6.30	339.36
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	1678.58	18074.48
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	90259.88	1002421.10
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	90259.88	1002421.10

## DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		0.00	0.00
(i) Federal Share.....			
(ii) Non-Federal Share.....		0.00	0.00
(b) Other Federal Operating Expenditures.....		83078.32	664022.76
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....		83078.32	664022.76
22. Transfers to Affiliated/Other Party Committees.....		0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		5000.00	305000.00
24. Independent Expenditure (use Schedule E) .....		0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....		0.00	0.00
26. Loan Repayments Made.....		0.00	0.00
27. Loans Made.....		0.00	0.00
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....		0.00	5800.00
(b) Political Party Committees .....		0.00	0.00
(c) Other Political Committees (such as PACs) .....		0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....		0.00	5800.00
29. Other Disbursements.....		5000.00	44899.99
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share .....		0.00	0.00
(ii) "Levin" Share .....		0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....		0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....		0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..		93078.32	1019722.75
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....		93078.32	1019722.75

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	88575.00	984007.26
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	5800.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	88575.00	978207.26
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	83078.32	664022.76
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	6.30	339.36
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	83072.02	663683.40

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 66

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Hill PAC

A. Full Name (Last, First, Middle Initial)

Fred Bacher

Mailing Address 24 Dockside Lane

City

State

Zip Code

Key Largo

FL

33037

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 3 1 / 2 0 0 6

Transaction ID: C59833

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)

Donald Blinken

Mailing Address 435 East 52nd Street

City

State

Zip Code

Manhattan

NY

10022

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 4 / 2 0 0 6

Transaction ID: C59824

Amount of Each Receipt this Period

5000.00

C. Full Name (Last, First, Middle Initial)

Vera Blinken

Mailing Address 435 East 52nd Street

City

State

Zip Code

New York

NY

10022

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
None

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 4 / 2 0 0 6

Transaction ID: C59825

Amount of Each Receipt this Period

5000.00

**SUBTOTAL** of Receipts This Page (optional) .....

10500.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 66

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Hill PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Robert M. Browne		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 2 7 / 2 0 0 6	
Mailing Address 25 Central Park West Apartment 210		<b>Transaction ID:</b> C59830	
City State Zip Code New York NY 10023		Amount of Each Receipt this Period 3000.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Corcoran		Occupation Real Estate Broker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3500.00	
<b>B.</b> Full Name (Last, First, Middle Initial) Myron M. Cherry		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 3 1 / 2 0 0 6	
Mailing Address 30 North La Salle Street Suite 2300		<b>Transaction ID:</b> C59838	
City State Zip Code Chicago IL 60602		Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Myron M. Cherry & Associates LLC		Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2500.00	
<b>C.</b> Full Name (Last, First, Middle Initial) Kenneth Cole		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 2 2 / 2 0 0 6	
Mailing Address 1619 Purchase Street		<b>Transaction ID:</b> C59826	
City State Zip Code Purchase NY 10577		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Kenneth Cole Productions		Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

**SUBTOTAL** of Receipts This Page (optional) .....

10500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 66

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Hill PAC

**A.** Full Name (Last, First, Middle Initial)  
 Maria Cuomo Cole  
 Mailing Address 1619 Purchase Street

City State Zip Code  
 Purchase NY 10577

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 Help Housing Corporation

Occupation  
 CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 2 2 / 2 0 0 6

Transaction ID: C59827

Amount of Each Receipt this Period

5000.00

**B.** Full Name (Last, First, Middle Initial)  
 Beth E. Dozoretz  
 Mailing Address 240 Corporate Boulevard  
 Suite 400

City State Zip Code  
 Norfolk VA 23502-4948

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 Senior Vice President

Occupation  
 ValueOptions Healthcare Inc.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 2 8 / 2 0 0 6

Transaction ID: C59829

Amount of Each Receipt this Period

2000.00

**C.** Full Name (Last, First, Middle Initial)  
 Dina Dublon  
 Mailing Address 86 Sycamore Avenue

City State Zip Code  
 Mount Vernon NY 10553

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 JP Morgan Chase Bank

Occupation  
 CFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 3 1 / 2 0 0 6

Transaction ID: C59837

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

8000.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 9 / 66

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Hill PAC

**A.** Full Name (Last, First, Middle Initial)  
John W. Fitzpatrick  
Mailing Address 687 Lexington Avenue

City State Zip Code  
New York NY 10022

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Fitzpatrick Hotel Group

Occupation  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 8 / 2 0 0 6

Transaction ID: C59832

Amount of Each Receipt this Period

5000.00

**B.** Full Name (Last, First, Middle Initial)  
Dalia Glottman  
Mailing Address 5446 North Bay Road

City State Zip Code  
Miami Beach FL 33140

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 4 / 2 0 0 6

Transaction ID: C59822

Amount of Each Receipt this Period

5000.00

**C.** Full Name (Last, First, Middle Initial)  
Linda C. Harris  
Mailing Address c/o Sonnenschein Nath & Rosenthal  
7800 Sears Tower

City State Zip Code  
Chicago IL 60608

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Sonnenschein Nath & Rosen-  
thal

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 3 1 / 2 0 0 6

Transaction ID: C59839

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

10500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 10 / 66

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Hill PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Lorna Brett Howard Mailing Address 80 Irving Place City New York State NY Zip Code 10003 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00		Date of Receipt MM / DD / YYYY 07 / 31 / 2006 <b>Transaction ID: C59834</b> Amount of Each Receipt this Period 5000.00
<b>B.</b> Full Name (Last, First, Middle Initial) Walter Kaye Mailing Address 475 Park Avenue Apartment 10A City New York State NY Zip Code 10022 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer The Walter Kaye Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00		Date of Receipt MM / DD / YYYY 07 / 31 / 2006 <b>Transaction ID: C59845</b> Amount of Each Receipt this Period 5000.00
<b>C.</b> Full Name (Last, First, Middle Initial) Ki Kim Mailing Address 25 Tweed Boulevard City Nyack State NY Zip Code 10960 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer N/A Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00		Date of Receipt MM / DD / YYYY 07 / 05 / 2006 <b>Transaction ID: C59812</b> Amount of Each Receipt this Period 5000.00

SUBTOTAL of Receipts This Page (optional) .....

15000.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 66

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Hill PAC

A.

Full Name (Last, First, Middle Initial)

Won H. Kim

Mailing Address 25 Tweed Boulevard

City State Zip Code  
 Nyack NY 10960

FEC ID number of contributing federal political committee.

C

Name of Employer  
U.S. Meat, Inc.Occupation  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 0 5 / 2 0 0 6

Transaction ID: C59813

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Hans Li

Mailing Address 230 Central Park South  
Number 14E

City State Zip Code  
 New York NY 10019

FEC ID number of contributing federal political committee.

C

Name of Employer  
Waka FoundationOccupation  
Founder and Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 3 1 / 2 0 0 6

Transaction ID: C59835

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Robert B. Linder

Mailing Address 2 North Dean Street  
Suite 206

City State Zip Code  
 Englewood NJ 07631

FEC ID number of contributing federal political committee.

C

Name of Employer  
SelfOccupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 2 0 / 2 0 0 6

Transaction ID: C59821

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional) .....

7000.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 66

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Hill PAC

Full Name (Last, First, Middle Initial)

A. George J. Maloof, Jr.

Mailing Address 701 Comanche Road, N.E.

City State Zip Code  
 Albuquerque NM 87107

FEC ID number of contributing federal political committee.

C

Name of Employer  
Palm CasinoOccupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 1 9 / 2 0 0 6

Transaction ID: C59819

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

B. Eileen C. McDonagh

Mailing Address 153 Watson Road

City State Zip Code  
 Belmont MA 02478

FEC ID number of contributing federal political committee.

C

Name of Employer  
Northeastern UniversityOccupation  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 2 4 / 2 0 0 6

Transaction ID: C59823

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Nazee Moinian

Mailing Address 1045 Park Avenue

City State Zip Code  
 New York NY 10028

FEC ID number of contributing federal political committee.

C

Name of Employer  
N/AOccupation  
Student

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 3 1 / 2 0 0 6

Transaction ID: C59846

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional) .....

9500.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 66

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Hill PAC

Full Name (Last, First, Middle Initial)

**A.** John Young Park

Mailing Address 1049 Rosedale Road

City State Zip Code  
 North Woodmere NY 11581

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Small Business Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 2 5 / 2 0 0 6

Transaction ID: C59831

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B.** Denise Regan Picker

Mailing Address Post Office Box 841

City State Zip Code  
 Shelter Island NY 11964

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Artist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 2 4 / 2 0 0 6

Transaction ID: C59828

Amount of Each Receipt this Period

1250.00

Full Name (Last, First, Middle Initial)

**C.** Diane Rosen

Mailing Address 911 Park Avenue

City State Zip Code  
 New York NY 10021

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 1 2 / 2 0 0 6

Transaction ID: C59814

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

2750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 66

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Hill PAC

**A.** Full Name (Last, First, Middle Initial)  
Howard A. Rubin  
Mailing Address 540 Long Ridge Road

City State Zip Code  
Pound Ridge NY 10576

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 3 1 / 2 0 0 6

Transaction ID: C59836

Amount of Each Receipt this Period

5000.00

**B.** Full Name (Last, First, Middle Initial)  
Michael Skloff  
Mailing Address 16030 Ventura Boulevard  
Suite 380

City State Zip Code  
Encino CA 91436

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Composer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 8 / 2 0 0 6

Transaction ID: C59840

Amount of Each Receipt this Period

5000.00

**C.** Full Name (Last, First, Middle Initial)  
Roy M. Spence, Jr.  
Mailing Address c/o GSD&M  
828 West 6th Street

City State Zip Code  
Austin TX 78703

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
GSD&M

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 3 1 / 2 0 0 6

Transaction ID: C59841

Amount of Each Receipt this Period

2000.00

**SUBTOTAL** of Receipts This Page (optional) .....

12000.00

**TOTAL** This Period (last page this line number only) .....

85750.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 66

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Hill PAC

**A.** Full Name (Last, First, Middle Initial)  
DLA Piper Rudnick Gray Cary U.S. LLP PAC

Mailing Address 1200 19th Street, N.W.  
Suite 700

City State Zip Code  
Washington DC 20036

FEC ID number of contributing  
federal political committee.

**C** C00151340

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 0 / 2 0 0 6

Transaction ID: C59820

Amount of Each Receipt this Period

2500.00

**SUBTOTAL** of Receipts This Page (optional) .....

2500.00

**TOTAL** This Period (last page this line number only) .....

2500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 66

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Hill PAC

**A.**

Full Name (Last, First, Middle Initial)

Walter Karl

Mailing Address 2 Blue Hill Plaza  
Post Office Box 1662

City State Zip Code  
Pearl River NY 10965-8662

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5136.44

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 9 / 2 0 0 6

Transaction ID: C59818

Amount of Each Receipt this Period

1678.58

List Rental Income

**SUBTOTAL** of Receipts This Page (optional) .....

1678.58

**TOTAL** This Period (last page this line number only) .....

1678.58



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 17 / 66

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Hill PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Huma Abedin		<b>Transaction ID:</b> D6529 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		0	3		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	7		0	3		2	0	0	6													
Mailing Address 922 24th Street, N.W. Number 504		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>87.50</td> </tr> </table>	87.50																			
87.50																						
City Washington State DC Zip Code 20037																						
Purpose of Disbursement Meeting Expense: Food & Beverage Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type		001																			
001																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>B.</b> Full Name (Last, First, Middle Initial) Huma Abedin		<b>Transaction ID:</b> D6530 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	6		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	7		2	6		2	0	0	6													
Mailing Address 922 24th Street, N.W. Number 504		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>292.50</td> </tr> </table>	292.50																			
292.50																						
City Washington State DC Zip Code 20037																						
Purpose of Disbursement Meeting Expense: Food & Beverage Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type		001																			
001																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>C.</b> Full Name (Last, First, Middle Initial) Huma Abedin		<b>Transaction ID:</b> D6531 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	4		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	7		1	4		2	0	0	6													
Mailing Address 922 24th Street, N.W. Number 504		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>819.33</td> </tr> </table>	819.33																			
819.33																						
City Washington State DC Zip Code 20037																						
Purpose of Disbursement Wages Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type		001																			
001																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					

**SUBTOTAL** of Disbursements This Page (optional) .....

1199.33

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 18 / 66

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Hill PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Huma Abedin		<b>Transaction ID:</b> D6532 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 1 / 2 0 0 6</div> </div>
Mailing Address 922 24th Street, N.W. Number 504		<b>Amount of Each Disbursement this Period</b> <div>819.33</div>
City Washington State DC Zip Code 20037		
Purpose of Disbursement Wages Candidate Name	<div>001</div> Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Aetna US Healthcare		<b>Transaction ID:</b> D6500 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 1 / 2 0 0 6</div> </div>
Mailing Address 1301 McCormick Drive Mailstop F264		<b>Amount of Each Disbursement this Period</b> <div>4664.55</div>
City Largo State MD Zip Code 20774		
Purpose of Disbursement Health Insurance Candidate Name	<div>001</div> Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) American Express		<b>Transaction ID:</b> D6501 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 1 / 2 0 0 6</div> </div>
Mailing Address Post Office Box 53852		<b>Amount of Each Disbursement this Period</b> <div>1632.00</div>
City Phoenix State AZ Zip Code 85072-3852		
Purpose of Disbursement Credit Card Process Fee Candidate Name	<div>001</div> Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**SUBTOTAL** of Disbursements This Page (optional) .....

**7115.88**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 19 / 66

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Hill PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Samir Arora		<b>Transaction ID:</b> D6575 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 4 / 2 0 0 6</div> </div>
Mailing Address 1601 18th Street, N.W. Apartment 1007		<b>Amount of Each Disbursement this Period</b> <div>161.67</div>
City Washington State DC Zip Code 20009		
Purpose of Disbursement Wages	<div>001</div> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Samir Arora		<b>Transaction ID:</b> D6576 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 1 / 2 0 0 6</div> </div>
Mailing Address 1601 18th Street, N.W. Apartment 1007		<b>Amount of Each Disbursement this Period</b> <div>161.67</div>
City Washington State DC Zip Code 20009		
Purpose of Disbursement Wages	<div>001</div> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Kathryn Balcerzak		<b>Transaction ID:</b> D6549 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 4 / 2 0 0 6</div> </div>
Mailing Address 7303 Meadow Wood Way		<b>Amount of Each Disbursement this Period</b> <div>248.05</div>
City Clarksville State MD Zip Code 21209		
Purpose of Disbursement Wages	<div>001</div> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**SUBTOTAL** of Disbursements This Page (optional) .....

**571.39**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 20 / 66

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Hill PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Kathryn Balcerzak		<b>Transaction ID:</b> D6550 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 1 / 2 0 0 6</div> </div>	
Mailing Address 7303 Meadow Wood Way		<b>Amount of Each Disbursement this Period</b> <div>248.05</div>	
City Clarksville	State MD		Zip Code 21209
Purpose of Disbursement Wages			<div>001</div> Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>B.</b> Full Name (Last, First, Middle Initial) Jesse Berney		<b>Transaction ID:</b> D6632 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 3 / 2 0 0 6</div> </div>	
Mailing Address 428 Jefferson Street, N.W.		<b>Amount of Each Disbursement this Period</b> <div>40.97</div>	
City Washington	State DC		Zip Code 20011
Purpose of Disbursement Office Equipment			<div>001</div> Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>C.</b> Full Name (Last, First, Middle Initial) Jesse Berney		<b>Transaction ID:</b> D6633 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 4 / 2 0 0 6</div> </div>	
Mailing Address 428 Jefferson Street, N.W.		<b>Amount of Each Disbursement this Period</b> <div>671.19</div>	
City Washington	State DC		Zip Code 20011
Purpose of Disbursement Wages			<div>001</div> Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

**SUBTOTAL** of Disbursements This Page (optional) .....

960.21

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 21 / 66

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Hill PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Jesse Berney		<b>Transaction ID:</b> D6634 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		3	1		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	7		3	1		2	0	0	6													
Mailing Address 428 Jefferson Street, N.W.		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>671.19</td> </tr> </table>	671.19																			
671.19																						
City Washington State DC Zip Code 20011																						
Purpose of Disbursement Wages																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>236.88</td> </tr> </table>	236.88																			
236.88																						
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:																						
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
<b>B.</b> Full Name (Last, First, Middle Initial) Boston Mutual Life Insurance Co.		<b>Transaction ID:</b> D6635 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	7		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	7		1	7		2	0	0	6													
Mailing Address One Enterprise Drive Suite 2		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>16.25</td> </tr> </table>	16.25																			
16.25																						
City Shelton State CT Zip Code 06484																						
Purpose of Disbursement Employee Benefits																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>924.32</td> </tr> </table>	924.32																			
924.32																						
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:																						
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
<b>C.</b> Full Name (Last, First, Middle Initial) Card Services International		<b>Transaction ID:</b> D6630 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		0	1		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	7		0	1		2	0	0	6													
Mailing Address Post Office Box 5180		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>924.32</td> </tr> </table>	924.32																			
924.32																						
City Simi Valley State CA Zip Code 93062-5180																						
Purpose of Disbursement Banking Fee																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>924.32</td> </tr> </table>	924.32																			
924.32																						
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:																						
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

924.32

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 22 / 66

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Hill PAC

Full Name (Last, First, Middle Initial)

## **A. Card Services International**

Mailing Address Post Office Box 5180

City State Zip Code  
Simi Valley CA 93062-5180

Purpose of Disbursement  
Banking Fee

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D6631

Date of Disbursement

07 / 31 / 2006

Amount of Each Disbursement this Period

434.88

## **B. Central Parking System**

Mailing Address 1225 Eye Street, N.W.  
Lower Level

City State Zip Code  
Washington DC 20005

Purpose of Disbursement  
Parking

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D6563

Date of Disbursement

07 / 03 / 2006

Amount of Each Disbursement this Period

180.00

## **C. Central Parking System**

Mailing Address 1225 Eye Street, N.W.  
Lower Level

City State Zip Code  
Washington DC 20005

Purpose of Disbursement  
Parking

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D6564

Date of Disbursement

07 / 24 / 2006

Amount of Each Disbursement this Period

180.00

**SUBTOTAL** of Disbursements This Page (optional) .....

794.88

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 23 / 66

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Hill PAC

<b>A. Dennis Cheng</b> Full Name (Last, First, Middle Initial) Mailing Address 9 West 31st Street Apartment 15F City New York State NY Zip Code 10001 Purpose of Disbursement Wages Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D6577</b> Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 4 / 2 0 0 6 Amount of Each Disbursement this Period 326.84
<b>B. Dennis Cheng</b> Full Name (Last, First, Middle Initial) Mailing Address 9 West 31st Street Apartment 15F City New York State NY Zip Code 10001 Purpose of Disbursement Wages Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D6578</b> Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 1 / 2 0 0 6 Amount of Each Disbursement this Period 316.26
<b>C. Cindy Cicarell</b> Full Name (Last, First, Middle Initial) Mailing Address 1785 Lewis Road City South Wales State NY Zip Code 14139 Purpose of Disbursement Wages Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D6581</b> Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 4 / 2 0 0 6 Amount of Each Disbursement this Period 267.50

**SUBTOTAL** of Disbursements This Page (optional) .....

910.60

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Hill PAC

<b>A. Cindy Cicarell</b> Full Name (Last, First, Middle Initial) Mailing Address 1785 Lewis Road City South Wales State NY Zip Code 14139 Purpose of Disbursement Wages Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D6582</b> Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 1 / 2 0 0 6 Amount of Each Disbursement this Period 267.50 001 Category/ Type
<b>B. Cingular Wireless</b> Full Name (Last, First, Middle Initial) Mailing Address Post Office Box 8229 City Aurora State IL Zip Code 60572 Purpose of Disbursement Telephone Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D6574</b> Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 3 / 2 0 0 6 Amount of Each Disbursement this Period 25.93 001 Category/ Type
<b>C. Covad</b> Full Name (Last, First, Middle Initial) Mailing Address Post Office Box 39000 Department 33408 City San Francisco State CA Zip Code 94139 Purpose of Disbursement Internet Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D6547</b> Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 3 / 2 0 0 6 Amount of Each Disbursement this Period 93.54 001 Category/ Type

**SUBTOTAL** of Disbursements This Page (optional) .....

**386.97**

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 25 / 66

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Hill PAC

<b>A. Covad</b> Full Name (Last, First, Middle Initial) Mailing Address Post Office Box 39000 Department 33408 City San Francisco State CA Zip Code 94139 Purpose of Disbursement Internet Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D6548</b> Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 4 / 2 0 0 6 Amount of Each Disbursement this Period 72.48
<b>B. Crossroad Strategies/Media Innovations, LLC</b> Full Name (Last, First, Middle Initial) Mailing Address 1564A Wisconsin Avenue, NW City Washington State DC Zip Code 20007 Purpose of Disbursement Consulting/Website Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D6636</b> Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 7 / 2 0 0 6 Amount of Each Disbursement this Period 744.85
<b>C. Cushman &amp; Wakefield</b> Full Name (Last, First, Middle Initial) Mailing Address 1650 Tyson's Boulevard Commercial Accts Receivable City McLean State VA Zip Code 22102 Purpose of Disbursement Office Rent Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D6560</b> Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 7 / 2 0 0 6 Amount of Each Disbursement this Period 3847.62

**SUBTOTAL** of Disbursements This Page (optional) .....

**4664.95**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Hill PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Peter Daou		<b>Transaction ID:</b> D6641 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		3	1		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	7		3	1		2	0	0	6													
Mailing Address 333 Rector Place Number 15R		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>1250.00</td> </tr> </table>	1250.00																			
1250.00																						
City New York State NY Zip Code 10280																						
Purpose of Disbursement Consulting/Communications	<table border="1"> <tr> <td>001</td> </tr> </table>		001																			
001																						
Candidate Name	Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>B.</b> Full Name (Last, First, Middle Initial) Nalinee Darmrong		<b>Transaction ID:</b> D6551 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	4		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	7		1	4		2	0	0	6													
Mailing Address 1629 Columbia Road, N.W. Apartment 216		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>240.69</td> </tr> </table>	240.69																			
240.69																						
City Washington State DC Zip Code 20009																						
Purpose of Disbursement Wages	<table border="1"> <tr> <td>001</td> </tr> </table>		001																			
001																						
Candidate Name	Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>C.</b> Full Name (Last, First, Middle Initial) Nalinee Darmrong		<b>Transaction ID:</b> D6552 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		3	1		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	7		3	1		2	0	0	6													
Mailing Address 1629 Columbia Road, N.W. Apartment 216		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>240.69</td> </tr> </table>	240.69																			
240.69																						
City Washington State DC Zip Code 20009																						
Purpose of Disbursement Wages	<table border="1"> <tr> <td>001</td> </tr> </table>		001																			
001																						
Candidate Name	Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

1731.38

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Hill PAC

<b>A.</b> Full Name (Last, First, Middle Initial) DirecTV		<b>Transaction ID:</b> D6541 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 3 / 2 0 0 6</div> </div>
Mailing Address Post Office Box 60036		<b>Amount of Each Disbursement this Period</b> <div>27.85</div>
City Los Angeles State CA Zip Code 90060		
Purpose of Disbursement Subscription	<div>001</div> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) DirecTV		<b>Transaction ID:</b> D6542 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 3 / 2 0 0 6</div> </div>
Mailing Address Post Office Box 60036		<b>Amount of Each Disbursement this Period</b> <div>39.09</div>
City Los Angeles State CA Zip Code 90060		
Purpose of Disbursement Subscription	<div>001</div> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) DirecTV		<b>Transaction ID:</b> D6543 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 4 / 2 0 0 6</div> </div>
Mailing Address Post Office Box 60036		<b>Amount of Each Disbursement this Period</b> <div>26.48</div>
City Los Angeles State CA Zip Code 90060		
Purpose of Disbursement Subscription	<div>001</div> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

93.42

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 28 / 66

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Hill PAC

Full Name (Last, First, Middle Initial)

**A.** Patricia Solis Doyle

Mailing Address 3719 Morrison Street, N.W.

City Washington State DC Zip Code 20015

Purpose of Disbursement  
Meeting Expense: Food & Beverage

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D6502

Date of Disbursement

07 / 03 / 2006

Amount of Each Disbursement this Period

89.46

Full Name (Last, First, Middle Initial)

**B.** Patricia Solis Doyle

Mailing Address 3719 Morrison Street, N.W.

City Washington State DC Zip Code 20015

Purpose of Disbursement  
Meeting Expense: Food & Beverage

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D6503

Date of Disbursement

07 / 17 / 2006

Amount of Each Disbursement this Period

62.80

Full Name (Last, First, Middle Initial)

**C.** Patricia Solis Doyle

Mailing Address 3719 Morrison Street, N.W.

City Washington State DC Zip Code 20015

Purpose of Disbursement  
Travel

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D6504

Date of Disbursement

07 / 17 / 2006

Amount of Each Disbursement this Period

13.00

**SUBTOTAL** of Disbursements This Page (optional) .....

165.26

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 29 / 66

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Hill PAC

Full Name (Last, First, Middle Initial)

**A.** Patricia Solis Doyle

Mailing Address 3719 Morrison Street, N.W.

City Washington State DC Zip Code 20015

Purpose of Disbursement  
Wages

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D6505**

Date of Disbursement

07 / 14 / 2006

Amount of Each Disbursement this Period

2474.42

Full Name (Last, First, Middle Initial)

**B.** Patricia Solis Doyle

Mailing Address 3719 Morrison Street, N.W.

City Washington State DC Zip Code 20015

Purpose of Disbursement  
Wages

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D6506**

Date of Disbursement

07 / 31 / 2006

Amount of Each Disbursement this Period

2413.11

Full Name (Last, First, Middle Initial)

**C.** Nancy Eiring

Mailing Address 1213 Duncan Place, N.E.

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Wages

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D6615**

Date of Disbursement

07 / 14 / 2006

Amount of Each Disbursement this Period

963.03

**SUBTOTAL** of Disbursements This Page (optional) .....

5850.56

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 30 / 66

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Hill PAC

<b>A. Nancy Eiring</b> Full Name (Last, First, Middle Initial) Mailing Address 1213 Duncan Place, N.E. City Washington State DC Zip Code 20002 Purpose of Disbursement Wages Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D6616</b> Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 1 / 2 0 0 6 Amount of Each Disbursement this Period 951.59 001 Category/ Type
<b>B. Matthew Felan</b> Full Name (Last, First, Middle Initial) Mailing Address 14224 Jeffries Place City Midlothian State VA Zip Code 23114 Purpose of Disbursement Consulting/Fundraising Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D6617</b> Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 1 / 2 0 0 6 Amount of Each Disbursement this Period 1875.00 003 Category/ Type
<b>C. Lauren Fitterman</b> Full Name (Last, First, Middle Initial) Mailing Address 2400 16th Street, N.W. Apartment 504 City Washington State DC Zip Code 20009 Purpose of Disbursement Wages Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D6585</b> Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 4 / 2 0 0 6 Amount of Each Disbursement this Period 214.06 001 Category/ Type

**SUBTOTAL** of Disbursements This Page (optional) .....

**3040.65**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 31 / 66

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Hill PAC

<b>A. Lauren Fitterman</b> Full Name (Last, First, Middle Initial) Mailing Address 2400 16th Street, N.W. Apartment 504 City Washington State DC Zip Code 20009 Purpose of Disbursement Wages Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D6586</b> Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 1 / 2 0 0 6 Amount of Each Disbursement this Period 214.06 001 Category/ Type
<b>B. Dara Freed</b> Full Name (Last, First, Middle Initial) Mailing Address 383 Grand Street Apartment M306 City New York State NY Zip Code 10002 Purpose of Disbursement Wages Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D6566</b> Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 4 / 2 0 0 6 Amount of Each Disbursement this Period 952.30 001 Category/ Type
<b>C. Dara Freed</b> Full Name (Last, First, Middle Initial) Mailing Address 383 Grand Street Apartment M306 City New York State NY Zip Code 10002 Purpose of Disbursement Wages Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D6567</b> Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 1 / 2 0 0 6 Amount of Each Disbursement this Period 952.30 001 Category/ Type

**SUBTOTAL** of Disbursements This Page (optional) .....

**2118.66**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 32 / 66

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Hill PAC

<b>A.</b> Full Name (Last, First, Middle Initial) John Gans		<b>Transaction ID:</b> D6587 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	4		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	7		1	4		2	0	0	6													
Mailing Address 1425 P Street, N.W. Apartment 301		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>1660.96</td> </tr> </table>	1660.96																			
1660.96																						
City Washington State DC Zip Code 20005																						
Purpose of Disbursement Wages																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>1660.96</td> </tr> </table>	1660.96																			
1660.96																						
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
Category/Type 001																						
Purpose of Disbursement Wages																						
<b>B.</b> Full Name (Last, First, Middle Initial) John Gans		<b>Transaction ID:</b> D6588 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		3	1		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	7		3	1		2	0	0	6													
Mailing Address 1425 P Street, N.W. Apartment 301		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>1660.96</td> </tr> </table>	1660.96																			
1660.96																						
City Washington State DC Zip Code 20005																						
Purpose of Disbursement Wages																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>416.60</td> </tr> </table>	416.60																			
416.60																						
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
Category/Type 001																						
Purpose of Disbursement Wages																						
<b>C.</b> Full Name (Last, First, Middle Initial) Patrick Hallahan		<b>Transaction ID:</b> D6608 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	4		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	7		1	4		2	0	0	6													
Mailing Address 2011 Hillyer Place, N.W. Apartment 2		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>416.60</td> </tr> </table>	416.60																			
416.60																						
City Washington State DC Zip Code 20009																						
Purpose of Disbursement Wages																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>416.60</td> </tr> </table>	416.60																			
416.60																						
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
Category/Type 001																						
Purpose of Disbursement Wages																						

**SUBTOTAL** of Disbursements This Page (optional) .....

3738.52

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 33 / 66

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Hill PAC

<b>A. Patrick Hallahan</b> Full Name (Last, First, Middle Initial) Mailing Address 2011 Hillyer Place, N.W. Apartment 2 City Washington State DC Zip Code 20009 Purpose of Disbursement Wages Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D6609</b> Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 1 / 2 0 0 6 Amount of Each Disbursement this Period 416.60 001 Category/ Type
<b>B. Christie Houlihan</b> Full Name (Last, First, Middle Initial) Mailing Address 3003 Van Ness Street, N.W. Apartment 610W City Washington State DC Zip Code 20008 Purpose of Disbursement Wages Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D6618</b> Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 4 / 2 0 0 6 Amount of Each Disbursement this Period 482.70 001 Category/ Type
<b>C. Christine Hovde</b> Full Name (Last, First, Middle Initial) Mailing Address 1503 Autumn Honey Court Apartment D City Richmond State VA Zip Code 23229 Purpose of Disbursement Wages Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D6619</b> Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 1 / 2 0 0 6 Amount of Each Disbursement this Period 57.71 001 Category/ Type

**SUBTOTAL** of Disbursements This Page (optional) .....

957.01

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 34 / 66

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Hill PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Heather Hurlburt		<b>Transaction ID:</b> D6614 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		3	1		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	7		3	1		2	0	0	6													
Mailing Address 516 West Washington		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>2500.00</td> </tr> </table>	2500.00																			
2500.00																						
City Ann Arbor State MI Zip Code 48103																						
Purpose of Disbursement Consulting/Communications																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Category/Type 001																				
<b>B.</b> Full Name (Last, First, Middle Initial) Lindsey K. Jack		<b>Transaction ID:</b> D6579 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	4		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	7		1	4		2	0	0	6													
Mailing Address 2601 Woodley Place, N.W. Apartment 915		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>161.61</td> </tr> </table>	161.61																			
161.61																						
City Washington State DC Zip Code 20008																						
Purpose of Disbursement Wages																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Category/Type 001																				
<b>C.</b> Full Name (Last, First, Middle Initial) Lindsey K. Jack		<b>Transaction ID:</b> D6580 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		3	1		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	7		3	1		2	0	0	6													
Mailing Address 2601 Woodley Place, N.W. Apartment 915		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>161.61</td> </tr> </table>	161.61																			
161.61																						
City Washington State DC Zip Code 20008																						
Purpose of Disbursement Wages																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Category/Type 001																				

**SUBTOTAL** of Disbursements This Page (optional) .....

2823.22

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 35 / 66

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Hill PAC

<b>A.</b> Full Name (Last, First, Middle Initial) James Center Property, LLC		<b>Transaction ID:</b> D6621 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 4 / 2 0 0 6</div> </div>
Mailing Address Post Office Box 8000 Department 454		<b>Amount of Each Disbursement this Period</b> <div>75.00</div>
City Buffalo State NY Zip Code 14267		
Purpose of Disbursement Office Rent	<div>001</div> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Lexis Nexis		<b>Transaction ID:</b> D6562 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 7 / 2 0 0 6</div> </div>
Mailing Address Post Office Box 7247-7090		<b>Amount of Each Disbursement this Period</b> <div>420.89</div>
City Philadelphia State PA Zip Code 19170-7090		
Purpose of Disbursement Subscription	<div>001</div> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Judith Lichtman		<b>Transaction ID:</b> D6620 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 1 / 2 0 0 6</div> </div>
Mailing Address 2930 Ellicott Street, N.W.		<b>Amount of Each Disbursement this Period</b> <div>1375.00</div>
City Washington State DC Zip Code 20008		
Purpose of Disbursement Consulting/Fundraising	<div>003</div> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**SUBTOTAL** of Disbursements This Page (optional) .....

1870.89

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 36 / 66

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Hill PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Jonathan Lovett		<b>Transaction ID:</b> D6612 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	4		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	7		1	4		2	0	0	6													
Mailing Address 1629 Columbia Road, NW Apartment 113		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>177.32</td> </tr> </table>	177.32																			
177.32																						
City Washington State DC Zip Code 20009																						
Purpose of Disbursement Wages																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>177.32</td> </tr> </table>	177.32																			
177.32																						
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
Category/Type 001																						
Purpose of Disbursement Wages																						
<b>B.</b> Full Name (Last, First, Middle Initial) Jonathan Lovett		<b>Transaction ID:</b> D6613 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		3	1		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	7		3	1		2	0	0	6													
Mailing Address 1629 Columbia Road, NW Apartment 113		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>177.32</td> </tr> </table>	177.32																			
177.32																						
City Washington State DC Zip Code 20009																						
Purpose of Disbursement Wages																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>60.00</td> </tr> </table>	60.00																			
60.00																						
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
Category/Type 002																						
Purpose of Disbursement Travel																						
<b>C.</b> Full Name (Last, First, Middle Initial) Bari Lurie		<b>Transaction ID:</b> D6533 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		0	3		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	7		0	3		2	0	0	6													
Mailing Address 1743 P Street, N.W. Number 404		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>60.00</td> </tr> </table>	60.00																			
60.00																						
City Washington State DC Zip Code 20009																						
Purpose of Disbursement Travel																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>60.00</td> </tr> </table>	60.00																			
60.00																						
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
Category/Type 002																						
Purpose of Disbursement Travel																						

**SUBTOTAL** of Disbursements This Page (optional) .....

414.64

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 37 / 66

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Hill PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Bari Lurie		<b>Transaction ID:</b> D6534 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 7 / 2 0 0 6</div> </div>
Mailing Address 1743 P Street, N.W. Number 404		<b>Amount of Each Disbursement this Period</b> <div>50.00</div>
City Washington State DC Zip Code 20009		
Purpose of Disbursement Travel	<div>002</div> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Bari Lurie		<b>Transaction ID:</b> D6535 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 4 / 2 0 0 6</div> </div>
Mailing Address 1743 P Street, N.W. Number 404		<b>Amount of Each Disbursement this Period</b> <div>958.42</div>
City Washington State DC Zip Code 20009		
Purpose of Disbursement Wages	<div>001</div> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Bari Lurie		<b>Transaction ID:</b> D6536 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 1 / 2 0 0 6</div> </div>
Mailing Address 1743 P Street, N.W. Number 404		<b>Amount of Each Disbursement this Period</b> <div>958.42</div>
City Washington State DC Zip Code 20009		
Purpose of Disbursement Wages	<div>001</div> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**SUBTOTAL** of Disbursements This Page (optional) .....

1966.84

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 38 / 66

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Hill PAC

Full Name (Last, First, Middle Initial)

**A.** Tamera Luzzatto

Mailing Address 3014 32nd Street, N.W.

City Washington State DC Zip Code 20008

Purpose of Disbursement  
Wages

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D6556**

Date of Disbursement

07 / 14 / 2006

Amount of Each Disbursement this Period

517.02

Full Name (Last, First, Middle Initial)

**B.** Tamera Luzzatto

Mailing Address 3014 32nd Street, N.W.

City Washington State DC Zip Code 20008

Purpose of Disbursement  
Wages

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D6557**

Date of Disbursement

07 / 31 / 2006

Amount of Each Disbursement this Period

517.02

Full Name (Last, First, Middle Initial)

**C.** Capricia Marshall

Mailing Address 1413 44th Street, N.W.

City Washington State DC Zip Code 20007

Purpose of Disbursement  
Wages

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D6526**

Date of Disbursement

07 / 14 / 2006

Amount of Each Disbursement this Period

1373.08

**SUBTOTAL** of Disbursements This Page (optional) .....

2407.12

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 39 / 66

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Hill PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Capricia Marshall		<b>Transaction ID:</b> D6527 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 1 / 2 0 0 6</div> </div>
Mailing Address 1413 44th Street, N.W.		<b>Amount of Each Disbursement this Period</b> <div>1373.08</div>
City Washington State DC Zip Code 20007		
Purpose of Disbursement Wages	<div>001</div> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) McNally International		<b>Transaction ID:</b> D6639 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 8 / 2 0 0 6</div> </div>
Mailing Address 460 Main Avenue		<b>Amount of Each Disbursement this Period</b> <div>600.00</div>
City Wallington State NJ Zip Code 07057		
Purpose of Disbursement Moving Expense	<div>001</div> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Shelly Moskwa		<b>Transaction ID:</b> D6509 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 4 / 2 0 0 6</div> </div>
Mailing Address 1744 V Street, N.W.		<b>Amount of Each Disbursement this Period</b> <div>216.91</div>
City Washington State DC Zip Code 20009		
Purpose of Disbursement Wages	<div>001</div> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**SUBTOTAL** of Disbursements This Page (optional) .....

**2189.99**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Hill PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Shelly Moskwa		<b>Transaction ID:</b> D6510 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 1 / 2 0 0 6</div> </div>
Mailing Address 1744 V Street, N.W.		<b>Amount of Each Disbursement this Period</b> <div>216.91</div>
City Washington State DC Zip Code 20009		
Purpose of Disbursement Wages		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>B.</b> Full Name (Last, First, Middle Initial) Anne Mullaly		<b>Transaction ID:</b> D6628 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 4 / 2 0 0 6</div> </div>
Mailing Address 99 Battery Place Apartment 11J		<b>Amount of Each Disbursement this Period</b> <div>280.15</div>
City New York State NY Zip Code 10280		
Purpose of Disbursement Wages		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>C.</b> Full Name (Last, First, Middle Initial) Anne Mullaly		<b>Transaction ID:</b> D6629 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 1 / 2 0 0 6</div> </div>
Mailing Address 99 Battery Place Apartment 11J		<b>Amount of Each Disbursement this Period</b> <div>280.15</div>
City New York State NY Zip Code 10280		
Purpose of Disbursement Wages		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

**SUBTOTAL** of Disbursements This Page (optional) .....

777.21

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 41 / 66

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Hill PAC

Full Name (Last, First, Middle Initial)

## **A. New York State Insurance Fund**

Mailing Address Post Office Box 4788  
Worker's Compensation

City Syracuse State NY Zip Code 13221

Purpose of Disbursement  
Insurance

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D6605**

Date of Disbursement

07 / 17 / 2006

Amount of Each Disbursement this Period

236.14

Full Name (Last, First, Middle Initial)

## **B. Sara O'Keefe**

Mailing Address 2522C North Fairfax Drive

City Arlington State VA Zip Code 22201

Purpose of Disbursement  
Wages

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D6610**

Date of Disbursement

07 / 14 / 2006

Amount of Each Disbursement this Period

649.29

Full Name (Last, First, Middle Initial)

## **C. Sara O'Keefe**

Mailing Address 2522C North Fairfax Drive

City Arlington State VA Zip Code 22201

Purpose of Disbursement  
Wages

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D6611**

Date of Disbursement

07 / 31 / 2006

Amount of Each Disbursement this Period

649.29

**SUBTOTAL** of Disbursements This Page (optional) .....

1534.72

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 42 / 66

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Hill PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Adam J. Parkhomenko		<b>Transaction ID:</b> D6558 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 4 / 2 0 0 6</div> </div>
Mailing Address 901 North Pollard Street Number 301		<b>Amount of Each Disbursement this Period</b> <div>788.57</div>
City Arlington State VA Zip Code 22203		
Purpose of Disbursement Wages	<div>001</div> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Adam J. Parkhomenko		<b>Transaction ID:</b> D6559 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 1 / 2 0 0 6</div> </div>
Mailing Address 901 North Pollard Street Number 301		<b>Amount of Each Disbursement this Period</b> <div>668.95</div>
City Arlington State VA Zip Code 22203		
Purpose of Disbursement Wages	<div>001</div> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Paychex		<b>Transaction ID:</b> D6507 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 0 / 2 0 0 6</div> </div>
Mailing Address 3060 Williams Drive Number 300		<b>Amount of Each Disbursement this Period</b> <div>316.78</div>
City Fairfax State VA Zip Code 22031		
Purpose of Disbursement Service Fee	<div>001</div> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**SUBTOTAL** of Disbursements This Page (optional) .....

1774.30

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 43 / 66

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Hill PAC

Full Name (Last, First, Middle Initial)

## **A. Paychex**

Mailing Address 3060 Williams Drive  
Number 300

City State Zip Code  
Fairfax VA 22031

Purpose of Disbursement  
401(k) Fee

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D6508**

Date of Disbursement

07 / 14 / 2006

Amount of Each Disbursement this Period

180.00

Full Name (Last, First, Middle Initial)

## **B. PNC Merchant Services**

Mailing Address 6551 Coventry Way  
2nd Floor

City State Zip Code  
Clinton MD 20735

Purpose of Disbursement  
Banking Fee

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D6589**

Date of Disbursement

07 / 03 / 2006

Amount of Each Disbursement this Period

1.00

Full Name (Last, First, Middle Initial)

## **C. PNC Merchant Services**

Mailing Address 6551 Coventry Way  
2nd Floor

City State Zip Code  
Clinton MD 20735

Purpose of Disbursement  
Banking Fee

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D6590**

Date of Disbursement

07 / 05 / 2006

Amount of Each Disbursement this Period

1.00

**SUBTOTAL** of Disbursements This Page (optional) .....

182.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 44 / 66

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Hill PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Heather Samuelson		<b>Transaction ID:</b> D6537 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 4 / 2 0 0 6</div> </div>
Mailing Address 1701 16th Street, N.W. Apartment 640		<b>Amount of Each Disbursement this Period</b> <div>397.69</div>
City Washington State DC Zip Code 20009		
Purpose of Disbursement Wages	<div>001</div> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Heather Samuelson		<b>Transaction ID:</b> D6538 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 1 / 2 0 0 6</div> </div>
Mailing Address 1701 16th Street, N.W. Apartment 640		<b>Amount of Each Disbursement this Period</b> <div>397.69</div>
City Washington State DC Zip Code 20009		
Purpose of Disbursement Wages	<div>001</div> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Ronald Schneider		<b>Transaction ID:</b> D6583 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 4 / 2 0 0 6</div> </div>
Mailing Address 4616 Fessenden Street, N.W.		<b>Amount of Each Disbursement this Period</b> <div>326.17</div>
City Washington State DC Zip Code 20016		
Purpose of Disbursement Wages	<div>001</div> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**SUBTOTAL** of Disbursements This Page (optional) .....

1121.55

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Hill PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Ronald Schneider		<b>Transaction ID:</b> D6584 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 1 / 2 0 0 6</div> </div>
Mailing Address 4616 Fessenden Street, N.W.		<b>Amount of Each Disbursement this Period</b> <div>326.17</div>
City Washington State DC Zip Code 20016		
Purpose of Disbursement Wages		
Candidate Name		
<div> <div>Office Sought:</div> <div> <input type="checkbox"/> House  <input type="checkbox"/> Senate  <input type="checkbox"/> President           </div> </div>		
<div> <div>Disbursement For:</div> <div> <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼           </div> </div>		
State: District:		
<b>B.</b> Full Name (Last, First, Middle Initial) Staples		<b>Transaction ID:</b> D6511 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 3 / 2 0 0 6</div> </div>
Mailing Address Post Office Box 9368		<b>Amount of Each Disbursement this Period</b> <div>49.12</div>
City Framingham State MA Zip Code 01702		
Purpose of Disbursement Office Supplies		
Candidate Name		
<div> <div>Office Sought:</div> <div> <input type="checkbox"/> House  <input type="checkbox"/> Senate  <input type="checkbox"/> President           </div> </div>		
<div> <div>Disbursement For:</div> <div> <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼           </div> </div>		
State: District:		
<b>C.</b> Full Name (Last, First, Middle Initial) Staples		<b>Transaction ID:</b> D6512 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 6 / 2 0 0 6</div> </div>
Mailing Address Post Office Box 9368		<b>Amount of Each Disbursement this Period</b> <div>50.89</div>
City Framingham State MA Zip Code 01702		
Purpose of Disbursement Office Supplies		
Candidate Name		
<div> <div>Office Sought:</div> <div> <input type="checkbox"/> House  <input type="checkbox"/> Senate  <input type="checkbox"/> President           </div> </div>		
<div> <div>Disbursement For:</div> <div> <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼           </div> </div>		
State: District:		

**SUBTOTAL** of Disbursements This Page (optional) .....

426.18

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Hill PAC

<b>A. Staples</b> Full Name (Last, First, Middle Initial) Mailing Address Post Office Box 9368 City Framingham State MA Zip Code 01702 Purpose of Disbursement Office Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D6513</b> Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 1 / 2 0 0 6 Amount of Each Disbursement this Period 81.00
<b>B. Staples</b> Full Name (Last, First, Middle Initial) Mailing Address Post Office Box 9368 City Framingham State MA Zip Code 01702 Purpose of Disbursement Office Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D6514</b> Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 2 / 2 0 0 6 Amount of Each Disbursement this Period 96.38
<b>C. Staples</b> Full Name (Last, First, Middle Initial) Mailing Address Post Office Box 9368 City Framingham State MA Zip Code 01702 Purpose of Disbursement Office Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D6515</b> Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 7 / 2 0 0 6 Amount of Each Disbursement this Period 143.60

**SUBTOTAL** of Disbursements This Page (optional) .....

320.98

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Hill PAC

<b>A. Staples</b> Full Name (Last, First, Middle Initial) Mailing Address Post Office Box 9368 City Framingham State MA Zip Code 01702 Purpose of Disbursement Office Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D6516</b> Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 9 / 2 0 0 6 Amount of Each Disbursement this Period 150.90 001 Category/ Type
<b>B. Staples</b> Full Name (Last, First, Middle Initial) Mailing Address Post Office Box 9368 City Framingham State MA Zip Code 01702 Purpose of Disbursement Office Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D6517</b> Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 5 / 2 0 0 6 Amount of Each Disbursement this Period 89.64 001 Category/ Type
<b>C. Staples</b> Full Name (Last, First, Middle Initial) Mailing Address Post Office Box 9368 City Framingham State MA Zip Code 01702 Purpose of Disbursement Office Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D6518</b> Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 6 / 2 0 0 6 Amount of Each Disbursement this Period 54.07 001 Category/ Type

**SUBTOTAL** of Disbursements This Page (optional) .....

294.61

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Hill PAC

<b>A. Staples</b> Full Name (Last, First, Middle Initial) Mailing Address Post Office Box 9368 City Framingham State MA Zip Code 01702 Purpose of Disbursement Office Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D6519</b> Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 1 / 2 0 0 6 Amount of Each Disbursement this Period 146.59 001 Category/ Type
<b>B. Lindsey Summers</b> Full Name (Last, First, Middle Initial) Mailing Address 3001 Broadway Number 2496 City New York State NY Zip Code 10027 Purpose of Disbursement Wages Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D6622</b> Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 4 / 2 0 0 6 Amount of Each Disbursement this Period 295.57 001 Category/ Type
<b>C. Lindsey Summers</b> Full Name (Last, First, Middle Initial) Mailing Address 3001 Broadway Number 2496 City New York State NY Zip Code 10027 Purpose of Disbursement Wages Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D6623</b> Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 1 / 2 0 0 6 Amount of Each Disbursement this Period 295.57 001 Category/ Type

**SUBTOTAL** of Disbursements This Page (optional) .....

737.73

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Hill PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Shradda Tewary		<b>Transaction ID:</b> D6624 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 4 / 2 0 0 6</div> </div>	
Mailing Address 2 Juliet Court		<b>Amount of Each Disbursement this Period</b> <div>275.45</div>	
City Princeton State NJ Zip Code 08540	Purpose of Disbursement Wages	<div>001</div> Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Shradda Tewary		<b>Transaction ID:</b> D6625 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 1 / 2 0 0 6</div> </div>	
Mailing Address 2 Juliet Court		<b>Amount of Each Disbursement this Period</b> <div>275.45</div>	
City Princeton State NJ Zip Code 08540	Purpose of Disbursement Wages	<div>001</div> Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Daniel C. Turrentine		<b>Transaction ID:</b> D6569 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 3 / 2 0 0 6</div> </div>	
Mailing Address 1425 P Street, N.W. Apartment 604		<b>Amount of Each Disbursement this Period</b> <div>15.20</div>	
City Washington State DC Zip Code 20005	Purpose of Disbursement Office Equipment	<div>001</div> Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**SUBTOTAL** of Disbursements This Page (optional) .....

**566.10**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Hill PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Daniel C. Turrentine		<b>Transaction ID:</b> D6570 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 7 / 2 0 0 6</div> </div>	
Mailing Address 1425 P Street, N.W. Apartment 604		<b>Amount of Each Disbursement this Period</b> <div>10.00</div>	
City Washington	State DC		Zip Code 20005
Purpose of Disbursement Travel			<div>002</div> Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			
<b>B.</b> Full Name (Last, First, Middle Initial) Daniel C. Turrentine		<b>Transaction ID:</b> D6571 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 4 / 2 0 0 6</div> </div>	
Mailing Address 1425 P Street, N.W. Apartment 604		<b>Amount of Each Disbursement this Period</b> <div>635.74</div>	
City Washington	State DC		Zip Code 20005
Purpose of Disbursement Wages			<div>001</div> Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			
<b>C.</b> Full Name (Last, First, Middle Initial) Daniel C. Turrentine		<b>Transaction ID:</b> D6572 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 1 / 2 0 0 6</div> </div>	
Mailing Address 1425 P Street, N.W. Apartment 604		<b>Amount of Each Disbursement this Period</b> <div>635.74</div>	
City Washington	State DC		Zip Code 20005
Purpose of Disbursement Wages			<div>001</div> Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

**SUBTOTAL** of Disbursements This Page (optional) .....

1281.48

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Hill PAC

Full Name (Last, First, Middle Initial)

## **A. United Parcel Service**

Mailing Address Post Office Box 7247-0244

City Philadelphia State PA Zip Code 19170

Purpose of Disbursement  
Shipping

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D6520

Date of Disbursement

07 / 17 / 2006

Amount of Each Disbursement this Period

248.24

Full Name (Last, First, Middle Initial)

## **B. Verizon Wireless**

Mailing Address Post Office Box 64268

City Baltimore State MD Zip Code 21264-4268

Purpose of Disbursement  
Telephone Service

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D6525

Date of Disbursement

07 / 03 / 2006

Amount of Each Disbursement this Period

29.37

Full Name (Last, First, Middle Initial)

## **C. Verizon**

Mailing Address Post Office Box 17577

City Baltimore State MD Zip Code 21297-0513

Purpose of Disbursement  
Telephone Service

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D6521

Date of Disbursement

07 / 03 / 2006

Amount of Each Disbursement this Period

472.64

**SUBTOTAL** of Disbursements This Page (optional) .....

750.25

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Hill PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Verizon		<b>Transaction ID:</b> D6522 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 7 / 2 0 0 6</div> </div>
Mailing Address Post Office Box 17577		<b>Amount of Each Disbursement this Period</b> <div>926.87</div>
City Baltimore State MD Zip Code 21297-0513		
Purpose of Disbursement Telephone Service Candidate Name	<div>001</div> Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Verizon		<b>Transaction ID:</b> D6523 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 7 / 2 0 0 6</div> </div>
Mailing Address Post Office Box 17577		<b>Amount of Each Disbursement this Period</b> <div>823.04</div>
City Baltimore State MD Zip Code 21297-0513		
Purpose of Disbursement Telephone Service Candidate Name	<div>001</div> Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Samantha Wolf		<b>Transaction ID:</b> D6553 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 4 / 2 0 0 6</div> </div>
Mailing Address 730 24th Street, N.W. Apartment 902		<b>Amount of Each Disbursement this Period</b> <div>259.38</div>
City Washington State DC Zip Code 20037		
Purpose of Disbursement Wages Candidate Name	<div>001</div> Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

2009.29

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Hill PAC

<b>A. Samantha Wolf</b> Full Name (Last, First, Middle Initial) Mailing Address 730 24th Street, N.W. Apartment 902 City Washington State DC Zip Code 20037 Purpose of Disbursement Wages Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D6554</b> Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 1 / 2 0 0 6 Amount of Each Disbursement this Period 259.38 001 Category/ Type
<b>B. Vennard Wright</b> Full Name (Last, First, Middle Initial) Mailing Address 6307 Hickory Road City Clinton State MD Zip Code 20735 Purpose of Disbursement Wages Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D6626</b> Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 4 / 2 0 0 6 Amount of Each Disbursement this Period 972.48 001 Category/ Type
<b>C. Vennard Wright</b> Full Name (Last, First, Middle Initial) Mailing Address 6307 Hickory Road City Clinton State MD Zip Code 20735 Purpose of Disbursement Wages Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D6627</b> Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 1 / 2 0 0 6 Amount of Each Disbursement this Period 972.48 001 Category/ Type

**SUBTOTAL** of Disbursements This Page (optional) .....

2204.34

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 54 / 66

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Hill PAC

Full Name (Last, First, Middle Initial)

## **A. US Bank**

Mailing Address Post Office Box 790429

City State Zip Code  
St. Louis MO 63179-0429

Purpose of Disbursement  
Credit Card Payment: Items Below

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D6539

Date of Disbursement

07 / 21 / 2006

Amount of Each Disbursement this Period

530.00

Full Name (Last, First, Middle Initial)

## **B. American Airlines**

Mailing Address Post Office Box 619616  
DFW Airport

City State Zip Code  
Dallas TX 75261

Purpose of Disbursement  
Travel

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D6544

Date of Disbursement

07 / 21 / 2006

Amount of Each Disbursement this Period

469.93

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **C. US Bank**

Mailing Address Post Office Box 790429

City State Zip Code  
St. Louis MO 63179-0429

Purpose of Disbursement  
Finance Charge

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D6540

Date of Disbursement

07 / 21 / 2006

Amount of Each Disbursement this Period

10.00

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) .....

530.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 55 / 66

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Hill PAC

Full Name (Last, First, Middle Initial)

## **A. Verizon Wireless**

Mailing Address Post Office Box 64268

City Baltimore State MD Zip Code 21264-4268

Purpose of Disbursement  
Office Equipment

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D6524

Date of Disbursement

07 / 21 / 2006

Amount of Each Disbursement this Period

10.58

[MEMO ITEM]

## **B. Paychex**

Mailing Address 3060 Williams Drive  
Number 300

City Fairfax State VA Zip Code 22031

Purpose of Disbursement  
Federal/State Taxes: Items Below

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D6644

Date of Disbursement

07 / 14 / 2006

Amount of Each Disbursement this Period

8005.75

## **C. Comptroller of the Treasury**

Mailing Address Withholding Tax Section  
Income Tax Division

City Annapolis State MD Zip Code 21411

Purpose of Disbursement  
State Tax

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D6603

Date of Disbursement

07 / 14 / 2006

Amount of Each Disbursement this Period

48.75

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) .....

8005.75

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 56 / 66

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Hill PAC

Full Name (Last, First, Middle Initial)

## **A. DC Office of Tax and Revenue**

Mailing Address Ben Franklin Station  
Post Office Box 7792

City Washington State DC Zip Code 20044

Purpose of Disbursement

State Tax

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D6593

Date of Disbursement

07 / 14 / 2006

Amount of Each Disbursement this Period

986.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **B. Department of Employment Service**

Mailing Address Office of Unemployment Comp.  
Post Office Box 96664

City Washington State DC Zip Code 20090-6664

Purpose of Disbursement

State Tax

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D6606

Date of Disbursement

07 / 14 / 2006

Amount of Each Disbursement this Period

90.63

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **C. Internal Revenue Service**

Mailing Address Post Office Box 105703

City Atlanta State GA Zip Code 30348

Purpose of Disbursement

Federal Tax

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D6591

Date of Disbursement

07 / 14 / 2006

Amount of Each Disbursement this Period

6685.68

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

0.00

**TOTAL** This Period (last page this line number only) ..... ►



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 57 / 66

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Hill PAC

Full Name (Last, First, Middle Initial)

## **A. New York State Employment Taxes**

Mailing Address Post Office Box 4119

City Binghamton State NY Zip Code 13902-4119

Purpose of Disbursement

State Tax

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D6598

Date of Disbursement

07 / 14 / 2006

Amount of Each Disbursement this Period

124.78

[MEMO ITEM]

## **B. Virginia Department of Taxation**

Mailing Address Post Office Box 27264

City Richmond State VA Zip Code 23261-7264

Purpose of Disbursement

State Tax

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D6545

Date of Disbursement

07 / 14 / 2006

Amount of Each Disbursement this Period

64.83

[MEMO ITEM]

## **C. Paychex**

Mailing Address 3060 Williams Drive  
Number 300

City Fairfax State VA Zip Code 22031

Purpose of Disbursement

Employee Benefits: Items Below

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D6645

Date of Disbursement

07 / 14 / 2006

Amount of Each Disbursement this Period

2712.71

**SUBTOTAL** of Disbursements This Page (optional) .....

2712.71

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Hill PAC

<b>A. Merrill Lynch</b> Full Name (Last, First, Middle Initial) Mailing Address Post Office Box 44000 City New Brunswick State NJ Zip Code 08906 Purpose of Disbursement Employee Benefits Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D6601</b> Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 4 / 2 0 0 6 Amount of Each Disbursement this Period 2712.71 <b>[MEMO ITEM]</b>
<b>B. Paychex</b> Full Name (Last, First, Middle Initial) Mailing Address 3060 Williams Drive Number 300 City Fairfax State VA Zip Code 22031 Purpose of Disbursement Federal/State Taxes: Items Below Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D6646</b> Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 1 / 2 0 0 6 Amount of Each Disbursement this Period 7729.27
<b>C. Comptroller of the Treasury</b> Full Name (Last, First, Middle Initial) Mailing Address Withholding Tax Section Income Tax Division City Annapolis State MD Zip Code 21411 Purpose of Disbursement State Tax Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: D6604</b> Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 1 / 2 0 0 6 Amount of Each Disbursement this Period 48.75 <b>[MEMO ITEM]</b>

**SUBTOTAL** of Disbursements This Page (optional) .....

7729.27

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 59 / 66

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Hill PAC

<b>A.</b> Full Name (Last, First, Middle Initial) DC Office of Tax and Revenue		<b>Transaction ID:</b> D6594 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		3	1		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	7		3	1		2	0	0	6													
Mailing Address Ben Franklin Station Post Office Box 7792		Amount of Each Disbursement this Period <table border="1"> <tr> <td>954.00</td> </tr> </table> <b>[MEMO ITEM]</b>	954.00																			
954.00																						
City Washington State DC Zip Code 20044																						
Purpose of Disbursement State Tax Candidate Name	001 Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
Full Name (Last, First, Middle Initial) <b>B.</b> Department of Employment Service																						
Mailing Address Office of Unemployment Comp. Post Office Box 96664		<b>Transaction ID:</b> D6607 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		3	1		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	7		3	1		2	0	0	6													
City Washington State DC Zip Code 20090-6664		Amount of Each Disbursement this Period <table border="1"> <tr> <td>83.86</td> </tr> </table> <b>[MEMO ITEM]</b>	83.86																			
83.86																						
Purpose of Disbursement State Tax Candidate Name	001 Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
Full Name (Last, First, Middle Initial) <b>C.</b> Internal Revenue Service																						
Mailing Address Post Office Box 105703		<b>Transaction ID:</b> D6592 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		3	1		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	7		3	1		2	0	0	6													
City Atlanta State GA Zip Code 30348		Amount of Each Disbursement this Period <table border="1"> <tr> <td>6458.14</td> </tr> </table> <b>[MEMO ITEM]</b>	6458.14																			
6458.14																						
Purpose of Disbursement Federal Tax Candidate Name	001 Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶			<table border="1"> <tr> <td>0.00</td> </tr> </table>	0.00																		
0.00																						
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		<table border="1"> <tr> <td></td> </tr> </table>																				

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 60 / 66

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Hill PAC

Full Name (Last, First, Middle Initial)

## **A. New York State Employment Taxes**

Mailing Address Post Office Box 4119

City Binghamton State NY Zip Code 13902-4119

Purpose of Disbursement

State Tax

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D6599

Date of Disbursement

07 / 31 / 2006

Amount of Each Disbursement this Period

123.91

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **B. Virginia Department of Taxation**

Mailing Address Post Office Box 27264

City Richmond State VA Zip Code 23261-7264

Purpose of Disbursement

State Tax

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D6546

Date of Disbursement

07 / 31 / 2006

Amount of Each Disbursement this Period

55.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **C. Paychex**

Mailing Address 3060 Williams Drive  
Number 300

City Fairfax State VA Zip Code 22031

Purpose of Disbursement

Employee Benefits: Items Below

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D6647

Date of Disbursement

07 / 31 / 2006

Amount of Each Disbursement this Period

2712.71

**SUBTOTAL** of Disbursements This Page (optional) .....

2712.71

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 61 / 66

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Hill PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Merrill Lynch		<b>Transaction ID:</b> D6602 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		3	1		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	7		3	1		2	0	0	6													
Mailing Address Post Office Box 44000		Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">2712.71</td> </tr> </table>	2712.71																			
2712.71																						
City New Brunswick State NJ Zip Code 08906	[MEMO ITEM]																					
Purpose of Disbursement Employee Benefits																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>B.</b> Full Name (Last, First, Middle Initial) Paychex		<b>Transaction ID:</b> D6648 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		3	1		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	7		3	1		2	0	0	6													
Mailing Address 3060 Williams Drive Number 300		Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">122.72</td> </tr> </table>	122.72																			
122.72																						
City Fairfax State VA Zip Code 22031	[MEMO ITEM]																					
Purpose of Disbursement State Taxes: Items Below																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>C.</b> Full Name (Last, First, Middle Initial) DC Office of Tax and Revenue		<b>Transaction ID:</b> D6595 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		3	1		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	7		3	1		2	0	0	6													
Mailing Address Ben Franklin Station Post Office Box 7792		Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">116.50</td> </tr> </table>	116.50																			
116.50																						
City Washington State DC Zip Code 20044	[MEMO ITEM]																					
Purpose of Disbursement State Tax																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					

**SUBTOTAL** of Disbursements This Page (optional) .....

122.72

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 62 / 66

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Hill PAC

Full Name (Last, First, Middle Initial)

## **A. New York State Employment Taxes**

Mailing Address Post Office Box 4119

City Binghamton State NY Zip Code 13902-4119

Purpose of Disbursement

State Tax

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D6600

Date of Disbursement

07 / 31 / 2006

Amount of Each Disbursement this Period

6.22

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

82690.59

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 63 / 66

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Hill PAC

Full Name (Last, First, Middle Initial)

**A.** Working Families Party

Mailing Address 88 Third Avenue 4th Floor

City  
Brooklyn

State  
NY

Zip Code  
11217

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☐ General  
☒ Other (specify) ▼

State:

District:

F

Transaction ID: D6568

Date of Disbursement

MM / DD / YYYY  
07 / 12 / 2006

Amount of Each Disbursement this Period

5000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5000.00

**TOTAL** This Period (last page this line number only) .....

5000.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 64 / 66

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Hill PAC

Full Name (Last, First, Middle Initial)

**A.** Show Up New York

Mailing Address 315 Flatbush Avenue  
Suite 406

City Brooklyn State NY Zip Code 11217

Purpose of Disbursement  
Contribution

Candidate Name

012  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D6642

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5000.00

**TOTAL** This Period (last page this line number only) .....

5000.00



**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 65 / 66

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)  
Hill PAC

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Mayfield Strategy Group

Nature of Debt (Purpose):  
Consulting/Website

Mailing Address 961 Ilima Way

City State ZIP Code  
Palo Alto CA 94306-2618

Outstanding Balance Beginning This Period

0.00

Transaction ID: D6499

Amount Incurred This Period

7755.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

7755.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Merkle Response Services

Nature of Debt (Purpose):  
Direct Mail

Mailing Address 13331 Pennsylvania Avenue

City State ZIP Code  
Hagerstown MD 21742

Outstanding Balance Beginning This Period

1700.00

Transaction ID: D4615

Amount Incurred This Period

1528.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3228.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
NGP Software

Nature of Debt (Purpose):  
Consulting/Computers

Mailing Address 5505 Connecticut Avenue, N.W.  
Post Mail Box 277

City State ZIP Code  
Washington DC 20015

Outstanding Balance Beginning This Period

2338.13

Transaction ID: D3231

Amount Incurred This Period

1275.63

Payment This Period

0.00

Outstanding Balance at Close of This Period

3613.76

1) **SUBTOTALS** This Period This Page (optional).....

14596.76

2) **TOTALS** This Period (last page this line number only).....3) **TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 66 / 66

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
Hill PAC**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Occasions CaterersNature of Debt (Purpose):  
Event Expense: Catering

Mailing Address 5458 3rd Street, N.E.

City State ZIP Code  
Washington DC 20011

Outstanding Balance Beginning This Period

3464.00

Transaction ID: D1170

Amount Incurred This Period

6021.78

Payment This Period

0.00

Outstanding Balance at Close of This Period

9485.78

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Ryan Phillips Utrecht & MacKinnonNature of Debt (Purpose):  
Consulting/LegalMailing Address 1133 Connecticut Avenue, N.W.  
Suite 300City State ZIP Code  
Washington DC 20036

Outstanding Balance Beginning This Period

5209.61

Transaction ID: D785

Amount Incurred This Period

10327.45

Payment This Period

0.00

Outstanding Balance at Close of This Period

15537.06

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
WhatCounts, Inc.Nature of Debt (Purpose):  
Email ServicesMailing Address 316 Occidental Avenue, South  
Suite 400City State ZIP Code  
Seattle WA 98104

Outstanding Balance Beginning This Period

0.00

Transaction ID: D6643

Amount Incurred This Period

993.42

Payment This Period

0.00

Outstanding Balance at Close of This Period

993.42

**1) SUBTOTALS** This Period This Page (optional).....

26016.26

**2) TOTALS** This Period (last page this line number only).....

40613.02

**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)